24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799
Check if X 24-hour report 48-hour report New report Amends report fi	iled on M M / D D / Y Y Y Y
Full Name of Payee Bend the Arc Jewish Action, Inc.	Date of Public Distribution/Dissemination
·	10 30 7 2016
Mailing Address 330 Seventh Ave., 19th floor	Amount
City State Zip Code	5411.00
New York NY 10001	Transaction ID : B634641 Date of Disbursement or Obligation
Purpose of Expenditure Canvassing-Estimated costs Category/ Type 003	10 30 Y 2016
Name of Federal Candidate Support Of	ffice Sought: House District:
Clinton, Hillary, , ,	President Senate State: US
Odichodi Todi To Dato	isbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
API Source	10 31 2016
Mailing Address 4471 Nicole Dr.	Amount
City State Zip Code	33.00
Lanham MD 20706	Transaction ID : B634651 Date of Disbursement or Obligation
Purpose of Expenditure Apparel Distribution-Estimated costs Category/ Type 004	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support O	Office Sought: House District:
Clinton, Hillary, , ,	President Senate State: US
	oisbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	5444.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Schifeling, Deirdre, , , [Electronically Filed] Date	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Schedule E)		101120				PAGE 2 FOR SE OF FO	OF 5 DRM 24/48
NAME OF COMMITTEE (In Full)					FEC ID	ENTIFICATION	NUMBER ▼
Planned Parenthood Votes					С	C00489799	
Check if X 24-hour report 48-hour report	New repo	ort Ame	ends repo	rt filed o	on Man /	D D / Y	- Y - Y - Y
Full Name of Payee					Date of Public	Distribution/Dis	semination
Bend the Arc Jewish Action, Inc.					10	30 / Y	2016
Mailing Address 330 Seventh Ave., 19th floor					Amount		
City State	te	Zip Code					5411.00
New York NY	(10001 Transaction			Transaction I Date of Disbu	ID: B634636 ursement or Oblig	gation
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type	003		10	30 / Y	2016
Name of Federal Candidate		x s	Support	Office \$	Sought:	House Dis	trict:
Cortez-Masto, Catherine, , ,			ppose		_	Senate S	tate: NV
Calendar Year-To-Date Per Election for Office Sought		1910174.13		Disburs 2016	sement For: Other (sp	Primary Decify) ▶	✗ General
Full Name of Payee					Date of Publi	c Distribution/Dis	semination
Bend the Arc Jewish Action, Inc.					M M M	/ D D / Y	2016
Mailing Address 330 Seventh Ave., 19th floor					Amount		2010
City State	te	Zip Code					5411.00
New York NY		10001		I	ransaction II Date of Disbu	D: B634634 ursement or Obli	
Purpose of Expenditure Canvassing-Estimated costs		Category/ Type	003		10	30	2016
Name of Federal Candidate		<u> </u>	Support	Office	Sought:	House Dis	strict:
Heck, Joseph, , ,			Oppose		President	Senate S	tate: NV
Calendar Year-To-Date Per Election for Office Sought		1910174.13		Disburs 2016	sement For: Other (sp	Primary	X General
(a) SUBTOTAL of Itemized Independent Expenditures				[0822.00
,,				,	7	7	0022100
(b) SUBTOTAL of Unitemized Independent Expenditures				•	7		-
(c) TOTAL Independent Expenditures				• •			
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized						
Schifeling, Deirdre, , , Signature	[Electroni	cally Filed]	Date	10	M / 31	2016	Y

Schedule E)				PAGE 3 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	X New repo	ort Amends re	eport filed	on M = M / D = D / Y = Y = Y
Full Name of Payee Priorities USA				Date of Public Distribution/Dissemination
Mailing Address 601 13th Street NW Suite 610N				10 31 2016 Amount
1 '	tate DC	Zip Code 20005		12681.06 Transaction ID : B634637
Purpose of Expenditure				Date of Disbursement or Obligation
Digital Ad Buy-Estimated costs		Category/ Type 00	04	10 31 / Y Y Y Y Y Y
Name of Federal Candidate		Support	Office	e Sought: House District:
Heck, Joseph, , ,		X Oppose		President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	,	1910174.13	Disbu 2016	orsement For: Primary x General Other (specify) ▶
Full Name of Payee				Date of Public Distribution/Dissemination
Priorities USA				10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 601 13th Street NW Suite 610N				Amount
City	State	Zip Code		32942.10
	DC	20005		Transaction ID : B634639 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ad Buy-Estimated costs		Category/ Type 00	04	10 / 31 / 2016
Name of Federal Candidate		Support	t Office	e Sought: House District:
Toomey, Pat, , ,		X Oppose	•	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		2657767.46	Disbu 2016	orsement For:
(a) CURTOTAL of Itamized Independent Eveneditures				
(a) SUBTOTAL of Itemized Independent Expenditures				45623.16
(b) SUBTOTAL of Unitemized Independent Expenditure	s		····· >	
(c) TOTAL Independent Expenditures			····· >	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its age	or authorized			
Schifeling, Deirdre, , , Signature	[Electroni	ically Filed] D		0 31 2016

Schedule E)	itti EXI EITE	, i on Lo		PAGE 4 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FF	EC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C00489799
Check if 24-hour report 48-hour report	X New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Bend the Arc Jewish Action, Inc.			M	
Mailing Address 330 Seventh Ave., 19th floor			Amount	30 2016
City New York	State NY	Zip Code	Transact	5411.00 tion ID : B634640
Purpose of Expenditure Canvassing-Estimated costs		Category/	Date of I	Disbursement or Obligation
Name of Federal Candidate		Type 003	Office Sought:	House District:
Trump, Donald, , ,		X Oppose	✗ President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	-, -,	3901283.55	Disbursement F 2016 Othe	or: Primary X General er (specify) ▶
Full Name of Payee Priorities USA			Date of	
Mailing Address 601 13th Street NW Suite 610	N		Amount	2010
City Washington	State DC	Zip Code 20005	Transacti	254376.84 on ID : B634642
Purpose of Expenditure Digital Ad Buy-Estimated costs		Category/ 004		Disbursement or Obligation
Name of Federal Candidate		Support	Office Sought:	House District:
Trump, Donald, , ,		x Oppose	X President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		3901283.55	Disbursement F 2016 Othe	For: Primary ★ General er (specify) ►
(a) SUBTOTAL of Itemized Independent Expendit	ures			259787.84
(b) SUBTOTAL of Unitemized Independent Exper	nditures			
(c) TOTAL Independent Expenditures			·	7 1 7 1 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any cand party committee) any political party committee or	idate or authorize			
Schifeling, Deirdre, , , Signature	[Electro	nically Filed] Date		31 2016

Schedule E)	PAGE 5 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	IDENTIFICATION NUMBER ▼
Planned Parenthood Votes C	C00489799
Check if X 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee Date of Pub	lic Distribution/Dissemination
FedEx Print Center	31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3 Colby Ct. Amount	
City State Zip Code	246.26
Bedford NH 03110 Transaction	ID: B634644 pursement or Obligation
Purpose of Expenditure Small Item Distribution-Estimated costs Category/ Type 004	31 2016
Name of Federal Candidate Support Office Sought:	House District:
Trump, Donald, , ,	Senate State: US
Calendar Year-To-Date Per Election for Office Sought Disbursement For: 2016 Other (s	Primary X General specify) ▶
Full Name of Payee Date of Pub	lic Distribution/Dissemination
Mailing Address Amount	
Autount	
City State Zip Code	, ,
Purpose of Expenditure Category/ Type Date of Disl	bursement or Obligation
Name of Federal Candidate Support Office Sought:	House District:
Oppose President	Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement For:	Primary General
Curion (c	
(a) SUBTOTAL of Itemized Independent Expenditures	246.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	321923.26
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopers with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
Schifeling, Deirdre, , , [Electronically Filed] Date 10 31	2016